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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	DR .	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/590,307	06/27/2007		Edouard Francois		PF040033	7089	
TITLE OF INVENTION ANALYSIS	N: METHOD OF ENCO	ODING AND DECODE	ng an image sequ	ENCE BY MEANS	OF HIERARCHICAL TE	MPORAL	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSU	E FEE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1740	\$300	\$0	\$2040	05/10/2012	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
FINDLEY, CHRISTOPHER G		2482	375-240110				
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AT PLEASE NOTE: Unit recordation as set fort (A) NAME OF ASSIGNATION Thomson Lice	ess an assignee is ident h in 37 CFR 3.11. Comp GNEE		data will appear on the	patent. If an assign in assignment.	ee is identified below, the cocountry)	locument has been filed for	
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government							
4a. The following fee(s):	are submitted:	4	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 070832 (enclose an extra copy of this form).				
5. Change in Entity State a. Applicant claim	tus (from status indicateds s SMALL ENTITY state	•	b. Applicant is no l	onger claiming SMA	LL ENTITY status. See 37 (CFR 1.27(g)(2).	
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Authorized Signature		- 4		Date April 10, 2012			
Typed or printed name Jack Schwartz				Registration No. 34,721			
This collection of inform an application. Confiden submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 223	adion is required by 37 (tiality is governed by 35 d application form to the ions for reducing this builting in a 22313-1450. DC 113-1450.	NOI SEND FEES OR	COMPLETED FORMS	or retain a benefit by estimated to take 12 dividual case. Any co icer, U.S. Patent and TO THIS ADDRESS			